

175536
 Raymond A. Taylor

Requestor's Name
 Address
 City/State/Zip
 Phone #

PO Box 1140
 TALLAHASSEE, FL 32302 222-2229

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. Associated Industries Insurance Co, Inc
 (Corporation Name) (Document #)
2. _____ Amend
 (Corporation Name) (Document #)
3. _____
 (Corporation Name) (Document #)
4. _____
 (Corporation Name) (Document #)

FILED
 99 MAR 25 PM 4:25
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

- Walk in Pick up time _____ Certified Copy
 Mail out Will wait Photocopy Certificate of Status

| NEW FILINGS | |
|--------------------------|-------------------|
| <input type="checkbox"/> | Profit |
| <input type="checkbox"/> | NonProfit |
| <input type="checkbox"/> | Limited Liability |
| <input type="checkbox"/> | Domestication |
| <input type="checkbox"/> | Other |

| AMENDMENTS | |
|-------------------------------------|--|
| <input checked="" type="checkbox"/> | Amendment |
| <input type="checkbox"/> | Resignation of R.A., Officer/ Director |
| <input type="checkbox"/> | Change of Registered Agent |
| <input type="checkbox"/> | Dissolution/Withdrawal |
| <input type="checkbox"/> | Merger |

Call when ready

| OTHER FILINGS | |
|--------------------------|------------------|
| <input type="checkbox"/> | Annual Report |
| <input type="checkbox"/> | Fictitious Name |
| <input type="checkbox"/> | Name Reservation |

| REGISTRATION/QUALIFICATION | |
|----------------------------|---------------------|
| <input type="checkbox"/> | Foreign |
| <input type="checkbox"/> | Limited Partnership |
| <input type="checkbox"/> | Reinstatement |
| <input type="checkbox"/> | Trademark |
| <input type="checkbox"/> | Other |

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 99 MAR 25 AM 8:21
 DEPARTMENT OF STATE
 DIVISION OF CORPORATIONS
 TALLAHASSEE, FLORIDA

Examiner's Initials
 [Signature]
 3/25/99



APPROVED
INSURANCE COMMISSIONER
AND TREASURER

MAR 17 1999

BY James Bevan
Legal Division

**CERTIFICATE OF AMENDMENT TO AMENDED AND
RESTATED ARTICLES OF INCORPORATION
OF
ASSOCIATED INDUSTRIES INSURANCE COMPANY, INC.**

FILED
99 MAR 25 PM 1:33
TALLAHASSEE, FLORIDA

We, the undersigned, respectively President and Secretary of Associated Industries Insurance Company, Inc., hereby certify that the following corporate action was taken by the full Board of Directors, where a vote was made for the purpose of amending and altering the Amended and Restated Articles of Incorporation of Associated Industries Insurance Company.

The Resolution and proposed amendment was read to the stockholders and Directors and by unanimous vote, the following amendment to Article I was adopted:

The principal office of the Corporation shall be located at 901 NW 51st Street, Boca Raton, Florida 33431, unless and until changed by resolution of the Board of Directors.

The proposed amendment having been adopted by the requisite majority vote, it was authorized that the President and Secretary prepare a certificate herein for the purpose of amending ARTICLE I.

This Amendment was duly approved by the Florida Department of Insurance on the _____ day of _____, 1999

Dated at Tallahassee, Florida this 26th day of February, 1999.

ASSOCIATED INDUSTRIES INSURANCE COMPANY, INC.

Robert W. West

Mr. Robert W. West, Chairman

Attested:

David P. Yon
Mr. David P. Yon, Secretary